

Child & Family Behavioral Health
And
Policy Committee

Meeting Summary
February 10, 2005
Henrico CSB – Conference Room C

Brian Meyer welcomed everyone and entertained a motion to approve the minutes from the previous meeting as amended. Don Roe moved and Stacie Fisher seconded the motion. The motion passed and the minutes were approved.

The next order of business related to adoption of the *Operational Guidelines*. Pertinent points:

- Minor edits – none
- Last page 7) d) There was discussion about dropping the number from a minimum of 15 active members to 12 active members in attendance until the membership roster is finalized. There was consensus about this issue. There was a related question about does active member have particular meaning and therefore should the language read: active membership of the group will consist of....
- Under 2) a) insert active before membership
- Recommendation to solicit membership from DSS and not list specific divisions within DSS for consideration for membership.

Don Roe moved to adopt the *Operational Guidelines* as amended and Fran Gallagher seconded the motion. The motion passed. The *Operational Guidelines* are effective as of the date of the meeting, February 10, 2005.

The third agenda item involved discussion about the formation of the Executive Subcommittee. There was agreement that it is important to have an Executive Subcommittee. Shirley Ricks nominated Fran Gallagher to serve as the Vice Chair of the Committee. The nomination was approved by acclamation. There was a recommendation that the new OCS Executive Director, Kim McGaughey, be added as member of the Executive Subcommittee. Brian Meyer moved and Don Roe seconded a motion to amend the *Operational Guidelines* to add the OCS Executive Director as a member of the Executive Subcommittee. The motion passed. Brian Meyer then appointed Shirley Ricks as Chair of the Membership Subcommittee.

The Chair asked for comments and/or recommendations about the invitation letter. Salient points:

- 1st line the word Child and Family Behavioral Health....
- The same holds true for the second paragraph
- Discussion about to whom should the letter go out, with an explanation of the commitment that will be asked of members, i.e., appointment for two-year terms, commitment to participate, etc.
- It was recommended that a copy of the budget language be added as an attachment to the letter to convey the message that this Committee is legislatively mandated

- It was further recommended that the section about membership in the *Operational Guidelines* be added as a second attachment to the letter to convey the importance of membership and what it entails
- The members re-committed to monthly meetings
- Recommendation not to ask for participation or for an alternate
- Suggestion to send two letters, one letter for the agencies legislatively mandated to participate and a second letter for other participants.
- Discussion about designing a logo was tabled until a future date.
- Consensus that the letter would go to the following:
 - The 329-G committee
 - The Child and Adolescent Special Populations Committee
 - The agencies listed in the budget language
- Recommendation was made to ask individuals to identify which agency or constituency they were representing

The final agenda item related to recommendations for the biennium report to the General Assembly. Pertinent points:

- The report needs to be highly focused
- The report should include the Custody Relinquishment recommendations, the VECCS recommendations, and recommendations from the DSS PIP reports
- Information about Strengthening Families (Commission on Youth Report) should be included as well as the Comprehensive Plan, specifically, the Child and Adolescent Special Populations Subcommittee report recommendations.
- Should the committee look at old studies, i.e., transition, SJR 440 that focuses on children with MH issues, the Commission on Youth study on CSA including residential services and services in rural communities.
- The committee needs to review recommendations of these studies and reports and identify areas and prioritize recommendations and perhaps form subcommittee to develop and address topical issues.

The next meeting scheduled for March 10th will include an orientation for new members. The meeting will begin at 9:30 with the orientation and the business meeting will start at 10:30. Please note: the change in meeting time and the change in location for the March 10th meeting. The meeting will be held at the Department for Rehabilitative Services at 1601 Willow Lawn Drive, Suite 370 A in Richmond. The Executive Subcommittee will conduct the orientation and will include a presentation about the Department's activities and projects and identification of major recommendations and focus of the recommendations related to regulations, policy, and budget. The April meeting will include review of the final recommendations from the Committee, April through May the draft report will be written and the final report sent to the Commissioner of DMHMRSAS in May.

Information and reports from other workgroups' activities related to children's issues:

- Special Populations workgroup - there is a need for services for children with mental retardation
- Discharge protocols as they relate to children does not take into account CSA; the committee has not met
- Restructuring Council – group sent a survey to facility directors and CSBs to determine needs, i.e. what are the regions' bed needs and what would bed

needs be if community services were in place and what services would they entail.

- Special Populations Juvenile Justice workgroup - amendment in the General Assembly to amend Inpatient Treatment for Minors Act.
- OCS – legislation for OCS to work in partnership with communities' assistance, creating a strong choice for families, related to support and resources and to develop community based services using the system of care principles, where this is the appropriate venue for services to occur.
- SEC – retreat in March or April, strategic planning and focus for SEC
- SA Special Population workgroup - little attention to adolescents with SA issues, DMHMRSAS submitted grant proposal to address infrastructure issues to SAMHSA.
- Announcements:
 - The Virginia Summer Institute for Addiction Studies will contain an adolescent track for SA.
 - The SLAT web page contains information about services. The Safe Families Recovery Project initiative will continue.
 - The System of Care Conference is planned for March 22 and March 23rd. DMHMRSAS will underwrite the conference for local boards and community teams to participate.
 - The VTCC Spring Forum will occur in May and the emphasis will be on co-occurring disorders and SA.
- SEC – several committees working on recommendations:
 - Relinquishment of Custody
- Adolescent Council for JJ
- Child and Family Task Force
- Special Education Advisory Council
- VECCS – early intervention for mental health plan-recommendations forthcoming
- Mental Health Planning Council – children's committee
- Early Childhood Development Coalition- MH subcommittee and grants advisory committee
- Pediatric Education Foundation
- Title V Medical Home Forum and Care Coordination for Children with behavioral health issues
- Regional plans
 - Critical success factors
 - Action steps
 - Budget
 - Infrastructure
 - Staffing
- Comprehensive State Plan – biennial survey to CSBs to determine unmet needs
- Pediatric Symptom Inventory
 - Physical exam and comprehensive plan to address prevention
- MR Waiver Advisory Committee
 - Medicaid waivers need to consider children; currently children do not meet the urgent care criteria and therefore slots are not available for children.
 - MR Program is putting together an autism team
- The VACSB Forum in May will include a strand on children's services. The forum is scheduled for May 11, 12, and 13 in Virginia Beach.

Motion to adjourn made by Jeanette DuVal and seconded by Martha Kurgans. The meeting was adjourned.